PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
PATENT EXAMINING OPERATION

Applicants: Eric ECKSTEIN, et al.

Serial No: 09/848,827	Group Art Unit: 2636
Filed: May 4, 2001	Examiner: Daniel Previl
Att. Docket No.: C1241/20184	Confirmation No.: 7477

For: Radio Frequency Detection and Identification System

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

AUG 0 5 2004

Technology Center 2600

Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated March 25, 2004, the time for responding thereto being

extended in accordance with a Petition for Extension of Time submitted herewith, please amend the

above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims, which begins on page 3 of

this paper.

Remarks begin on page 9 of this paper.

Application or Docket Number

09848837

7963-1079U 1

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	17	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	17 minus 20=	0
INDEPENDENT CLAIMS	4 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
X$ 9=		OR	X$18=	
X40=		OR	X80=	80.00
+135=		OR	+270=	
TOTAL		OR	TOTAL	790.00

8-2-04

CLAIMS AS AMENDED - PART II

AMENDMENT A		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
	Total	25	Minus	20	= 0
	Independent	3	Minus	4	= 1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

		OR	OTHER THAN SMALL ENTITY	
SMALL ENTITY		OR		
RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	86.00
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	Paid

AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
	Total		Minus		=
	Independent		Minus		=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

		OR		
RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
	Total		Minus		=
	Independent		Minus		=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

		OR		
RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.